

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		42	11/27/00
FORMALITY REVIEW		71/23	1-24-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Best Available Copy

Claim	Date
Final	
Original	
1	11/27/00
2	11/27/00
3	11/27/00
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Claim	Date
Final	
Original	
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Claim	Date
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150	11/27/00

If more than 150 claims or 10 actions  
staple additional sheet here

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